

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/581,014

FILING DATE

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
|--------------|----------|------|------------------------------------|------|------------------------------------|------|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 101 | | 1 | | | | |
| 102 | | 1 | | | | |
| 103 | | 1 | | | | |
| 104 | | 1 | | | | |
| 105 | | 1 | | | | |
| 106 | | 1 | | | | |
| 107 | | 1 | | | | |
| 108 | | 1 | | | | |
| 109 | | 1 | | | | |
| 110 | | 1 | | | | |
| 111 | | 1 | | | | |
| 112 | | 1 | | | | |
| 113 | | 1 | | | | |
| 114 | | 1 | | | | |
| 115 | | 1 | | | | |
| 116 | | 1 | | | | |
| 117 | | 1 | | | | |
| 118 | | 1 | | | | |
| 119 | | 1 | | | | |
| 120 | | 1 | | | | |
| 121 | | 1 | | | | |
| 122 | | 1 | | | | |
| 123 | | 1 | | | | |
| 124 | | 1 | | | | |
| 125 | | 1 | | | | |
| 126 | 1 | | | | | |
| 127 | 1 | 1 | | | | |
| 128 | | 1 | | | | |
| 129 | | 1 | | | | |
| 130 | 1 | 1 | | | | |
| 131 | 1 | 1 | | | | |
| 132 | | 1 | | | | |
| 133 | 1 | 1 | | | | |
| 134 | | 1 | | | | |
| 135 | | 1 | | | | |
| 136 | 1 | 1 | | | | |
| 137 | | 1 | | | | |
| 138 | | 1 | | | | |
| 139 | | 1 | | | | |
| 140 | | 1 | | | | |
| 141 | | 1 | | | | |
| 142 | | 1 | | | | |
| 143 | | 1 | | | | |
| 144 | | 1 | | | | |
| 145 | | 1 | | | | |
| 146 | | 1 | | | | |
| 147 | | 1 | | | | |
| 148 | | 1 | | | | |
| 149 | | 1 | | | | |
| 150 | | 1 | | | | |
| TOTAL IND. | | ↓ | | ↓ | | ↓ |
| TOTAL DEP. | | ← | | ← | | ← |
| TOTAL CLAIMS | | | | | | |

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
|--------------|----------|------|------------------------------------|------|------------------------------------|------|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 151 | | 1 | | | | |
| 152 | | 1 | | | | |
| 153 | | 1 | | | | |
| 154 | | 1 | | | | |
| 155 | | 1 | | | | |
| 156 | | 1 | | | | |
| 157 | | 1 | | | | |
| 158 | | 1 | | | | |
| 159 | | 1 | | | | |
| 160 | | 1 | | | | |
| 161 | | 1 | | | | |
| 162 | | 1 | | | | |
| 163 | | 1 | | | | |
| 164 | | 1 | | | | |
| 165 | | 1 | | | | |
| 166 | | 1 | | | | |
| 167 | | 1 | | | | |
| 168 | | 1 | | | | |
| 169 | | 1 | | | | |
| 170 | | 1 | | | | |
| 171 | | 1 | | | | |
| 172 | | 1 | | | | |
| 173 | | 1 | | | | |
| 174 | | 1 | | | | |
| 175 | | 1 | | | | |
| 176 | | 1 | | | | |
| 177 | | 1 | | | | |
| 178 | | 1 | | | | |
| 179 | | 1 | | | | |
| 180 | | 1 | | | | |
| 181 | | 1 | | | | |
| 182 | | 1 | | | | |
| 183 | | 1 | | | | |
| 184 | | 1 | | | | |
| 185 | | 1 | | | | |
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| 187 | | 1 | | | | |
| 188 | | 1 | | | | |
| 189 | | 1 | | | | |
| 190 | | 1 | | | | |
| 191 | | 1 | | | | |
| 192 | | 1 | | | | |
| 193 | | 1 | | | | |
| 194 | | 1 | | | | |
| 195 | | 1 | | | | |
| 196 | | 1 | | | | |
| 197 | | 1 | | | | |
| 198 | | 1 | | | | |
| 199 | | 1 | | | | |
| 200 | | 1 | | | | |
| TOTAL IND. | 20 | ↓ | | ↓ | | ↓ |
| TOTAL DEP. | 146 | ← | | ← | | ← |
| TOTAL CLAIMS | 166 | | | | | |

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| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
|--------------|----------|------|------------------------|------|------------------------|------|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
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| 50 | | / | | | | |
| TOTAL IND. | | ↓ | | ↓ | | ↓ |
| TOTAL DEP. | | ← | | ← | | ← |
| TOTAL CLAIMS | | | | | | |

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
|--------------|----------|------|------------------------|------|------------------------|------|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 51 | | / | | | | |
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| 88 | / | / | | | | |
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| 100 | | / | | | | |
| TOTAL IND. | | ↓ | | ↓ | | ↓ |
| TOTAL DEP. | | ← | | ← | | ← |
| TOTAL CLAIMS | | | | | | |